

Attorney for Debtor-In-Possession

UNITED STATES BANKRUPTCY COURT
DISTRICT OF _____

In Re:

Debtor(s).

CASE NUMBER _____

DEBTOR-IN-POSSESSION
MONTHLY OPERATING REPORT
FOR THE MONTH OF
_____, 20____

TO: THE HONORABLE LLOYD KING
UNITED STATES BANKRUPTCY JUDGE

The Debtor-In-Possession hereby files its monthly Operating Report pursuant to the United States Trustee's Operating and Reporting Requirements for Chapter 11 cases.

The undersigned counsel certifies that counsel has reviewed the monthly operating report and that it has been prepared in compliance with L.R. 2015-7.

DATED: _____

Attorney for Debtor-In-Possession

**UNITED STATES DEPARTMENT OF JUSTICE
OFFICE OF THE UNITED STATES TRUSTEE
DISTRICT OF _____**

In Re:

Debtor(s).

CHAPTER 11

CASE NO. _____

OPERATING REPORT NO. _____
FOR THE MONTH ENDING: _____

I. CASH RECEIPTS AND DISBURSEMENTS

A. (GENERAL ACCOUNT*)

- | | | |
|---|-----------------------------|----------|
| 1. TOTAL RECEIPTS PER ALL PRIOR GENERAL ACCOUNT REPORTS | | \$ _____ |
| 2. LESS: TOTAL DISBURSEMENTS PER ALL PRIOR GENERAL
ACCOUNT REPORTS | | \$ _____ |
| 3. BEGINNING BALANCE: (1 minus 2) | | \$ _____ |
| 4. RECEIPTS DURING CURRENT PERIOD: | | |
| ACCOUNTS RECEIVABLE - PRE-FILING | \$ _____ | |
| ACCOUNTS RECEIVABLE - POST-FILING | \$ _____ | |
| GENERAL SALES | \$ _____ | |
| OTHER (SPECIFY) _____ | \$ _____ | |
| OTHER** (SPECIFY) _____ | \$ _____ | |
| | TOTAL RECEIPTS THIS PERIOD: | \$ _____ |
| 5. BALANCE: (3 + 4) | | \$ _____ |
| 6. LESS: TOTAL DISBURSEMENTS DURING CURRENT PERIOD
(Total from Page 2) | | \$ _____ |
| 7. ENDING BALANCE: (5 minus 6)*** | | \$ _____ |
| 8. GENERAL ACCOUNT NUMBER _____
DEPOSITORY NAME AND LOCATION _____ | | |

* All receipts must be deposited into the general account.

** Include receipts from the sale of any real or personal property out of the ordinary course of business; attach an exhibit specifying what was sold, to whom, terms, and date of Court Order or Report of Sale.

*** Attach copy of bank statement.

TOTAL DISBURSEMENTS FROM GENERAL ACCOUNT FOR CURRENT PERIOD[illegible]

TOTAL DISBURSEMENTS THIS PERIOD: \$ _____

Add additional pages as necessary to include all disbursements.

I. CASH RECEIPTS AND DISBURSEMENTS (Continued)**B. (PAYROLL ACCOUNT)**

1. TOTAL RECEIPTS PER ALL PRIOR PAYROLL ACCOUNT REPORTS \$ _____
2. LESS: TOTAL DISBURSEMENTS PER ALL PRIOR PAYROLL
ACCOUNT REPORTS \$ _____
3. BEGINNING BALANCE (1 minus 2) \$ _____
4. RECEIPTS:
- TRANSFERRED FROM GENERAL ACCOUNT \$ _____
5. BALANCE (3 + 4) \$ _____
6. LESS: DISBURSEMENTS DURING CURRENT PERIOD
(Attach separate listing if needed)

<u>DATE</u>	<u>CHECK NO.</u>	<u>PAYEE</u>	<u>AMOUNT</u>
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TOTAL DISBURSEMENTS THIS PERIOD: \$ _____

7. ENDING BALANCE: (5 minus 6)* \$ _____

8. PAYROLL ACCOUNT NUMBER _____

DEPOSITORY NAME AND LOCATION _____

* Attach copy of bank statement.

Add additional pages as necessary to include all disbursements.

I. CASH RECEIPTS AND DISBURSEMENTS (Continued)**C. (TAX ACCOUNT)**

1. TOTAL RECEIPTS PER ALL PRIOR TAX ACCOUNT REPORTS \$ _____
2. LESS: TOTAL DISBURSEMENTS PER ALL PRIOR TAX ACCOUNT REPORTS \$ _____
3. BEGINNING BALANCE: (1 minus 2) \$ _____
4. RECEIPTS:
TRANSFERRED FROM GENERAL ACCOUNT \$ _____
- TOTAL RECEIPTS THIS PERIOD \$ _____
5. BALANCE: (3 + 4) \$ _____
6. LESS: DISBURSEMENTS DURING CURRENT PERIOD
(Attach separate listing if needed)

<u>DATE</u>	<u>CHECK NO.</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
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TOTAL DISBURSEMENTS THIS PERIOD \$ _____

7. ENDING BALANCE (5 minus 6)* \$ _____

8. TAX ACCOUNT NUMBER _____
DEPOSITORY NAME AND LOCATION _____

D. SUMMARY SCHEDULE OF CASH

ENDING BALANCES FOR PERIOD:

GENERAL ACCOUNT	\$ _____
PAYROLL ACCOUNT	\$ _____
TAX ACCOUNT	\$ _____
OTHER ACCOUNTS**: _____	\$ _____
OTHER MONIES**: _____	\$ _____
PETTY CASH***	\$ _____

TOTAL CASH AVAILABLE \$ _____

* Attach copy of bank statement.

** Specify the fund and the type of holding (i.e., CD, Savings Account, Investment securities, etc.), and the depository name, location, and account number.

*** Attach exhibit itemizing all petty cash transactions.

[illegible]

Add additional pages as necessary to include all disbursements.

II. TAX LIABILITIES
(Post-Petition Cash Basis)

For the Reporting Period:

Gross Sales Subject to Sales Tax \$_____

Total Wages Paid \$_____

	Post-Petition Amounts Paid	Post-Petition Amounts Owing	Post-Petition Amounts Delinquent
Federal Withholding			
State Withholding			
FICA - Employer's Share			
FICA - Employee's Share			
Federal Unemployment			
State Unemployment			
Sales and Use			
Real Property			
Other: (Specify)			
TOTALS			

AGING OF ACCOUNTS PAYABLE AND ACCOUNTS RECEIVABLE

	ACCOUNTS PAYABLE* (Post-Petition Only)	ACCOUNTS RECEIVABLE	
		Pre-Petition	Post-Petition
30 days or less			
31-60 days			
61-90 days			
91-120 days			
Over 120 days			
TOTAL			

* Attach exhibit listing and aging all accounts payable owing to payroll and utilities.

PROFIT AND LOSS STATEMENT
(Accrual Basis Only)

	<u>Current Month</u>	<u>Cumulative Post-Petition</u>
Sales:		
Gross Sales	<u> </u>	<u> </u>
Less: Returns/Discounts	(<u> </u>)	(<u> </u>)
Net Sales	<u> </u>	<u> </u>
Cost of Goods Sold:		
Beginning Inventory at cost	<u> </u>	<u> </u>
Purchases	<u> </u>	<u> </u>
Less: Ending Inventory at Cost	(<u> </u>)	(<u> </u>)
Cost of Goods Sold (COGS)	<u> </u>	<u> </u>
Gross Profit (Net Sales Less COGS)	<u> </u>	<u> </u>
Other Operating Income (Itemize*)	<u> </u>	<u> </u>
Operating Expenses:		
Officer/Mgmt Payroll	<u> </u>	<u> </u>
Payroll - Other Employees	<u> </u>	<u> </u>
Payroll Taxes	<u> </u>	<u> </u>
Other Taxes (Itemize*)	<u> </u>	<u> </u>
Depreciation and Amortization	<u> </u>	<u> </u>
Rental - Real Property	<u> </u>	<u> </u>
Leases - Personal Property	<u> </u>	<u> </u>
Insurance	<u> </u>	<u> </u>
Telephone and Utilities	<u> </u>	<u> </u>
Repairs and Maintenance	<u> </u>	<u> </u>
Travel and Entertainment (Itemize*)	<u> </u>	<u> </u>
Misc. Operating Expenses (Itemize*)	<u> </u>	<u> </u>
Total Operating Expenses	(<u> </u>)	(<u> </u>)
Net Gain/(Loss) from Operations	<u> </u>	<u> </u>
Non-Operating Income/Expense:		
Interest Income (Expense)	<u> </u>	<u> </u>
Other (Itemize*)	<u> </u>	<u> </u>
Total Non-Operating Income (Expense)	<u> </u>	<u> </u>
Reorganization Items:		
Gain (Loss) on Sale of Asset	<u> </u>	<u> </u>
Legal and Professional (Itemize*)	<u> </u>	<u> </u>
Rejected Executory Contracts	<u> </u>	<u> </u>
Other (Itemize*)	<u> </u>	<u> </u>
Total Reorganization Items	(<u> </u>)	(<u> </u>)

NET INCOME/(LOSS)

4

4

*Attach exhibit listing all itemizations required above.

BALANCE SHEET
DATE: _____

<u>Assets:</u>	<u>Amount</u>
Current Assets	
Cash	_____
Receivables	_____
Inventory	_____
Other current assets	_____
Total Current Assets	_____
Property, plant and equipment	_____
Goodwill	_____
Total Assets	4
<u>Liabilities and Shareholders' Deficit:</u>	
Liabilities Not Subject to Compromise	
Current liabilities	
Short-term borrowings	_____
Current maturities of senior debt	_____
Accounts payable trade	_____
Other liabilities	_____
Total Current Liabilities	_____
Liabilities Subject to Compromise	
Prepetition liabilities	_____
Senior debt, less current maturities	_____
Shareholders' deficit:	
Common stock	_____
Retained earnings(deficit)	_____
Total Shareholders' deficit	_____
Total Liabilities and Shareholders' Deficit	4

INSURANCE COVERAGE

	Name of Carrier	Amount of Coverage	Policy Expiration Date	Premium Paid Through Date
General Liability				
Workers Compensation				
Casualty				
Vehicle				
Other (Specify):				

QUESTIONNAIRE

- Has the Debtor-in-Possession made any payments on its pre-petition unsecured debt, except as have been authorized by the Court?
 _____ No.
 _____ Yes. Explain _____

- Is the Debtor-In-Possession delinquent in the payment of the United States Trustee Quarterly Fees?
 _____ No.
 _____ Yes. Explain _____

I, (Name, Title) _____, have fully read and understood the foregoing Debtor-in-Possession Operating Report and declare under penalty of perjury that the information enclosed herein is true and complete to the best of my knowledge.

DATED: _____

Principal for Debtor-in-Possession